

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

JUN 2 8 2001

Mr. Herbert Traschwandtner
W & H Dentalwerk Buermoos Gmbh
53 Ignaz-Glazer-Strasse
Buermoos,
AUSTRIA

Re: K011061

Trade/Device Name: Surgical Contra-Angel Handpieces

Types WS-56E, WS-75E/KM, WS-92

Regulation Number: 872.4200

Regulatory Class: I Product Code: EGS Dated: May 16, 2001 Received: June 11, 2001

Dear Mr. Traschwandtner:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements

concerning your device in the <u>Federal Register</u>. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4692. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours

Timot y A. Ulatowski

Director

Division of Dental, Infection Control and General Hospital Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Page ____ of _

treatment of dysgnathia, osteosynthesis, segmentosteotomia and especially minosteotomia. WS-92 E/3: for e.g. hemisection, wisdom tooth extraction. S-11: for application in the area of the front teeth, root tip resection, bone remove osteotomia on the upper and lower jaw, preprosthetic surgical modellation sequestrotomia, fenestration on the alveolar appendix, apical ventilation, bore modellation, bone smoothing. SL-11: same as the S-11, for areas which are difficult to reach. S-9: for e.g. wisdom tooth removal, root tip resection, fenestration, apical ventilation osteotomia on the upper and lower jaw, preprosthetic surgical modellation sequestrotomia, fenestration on the alveolar appendix, bone modellation. (PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED.) Concurrence of CDRH, Office of Device Evaluation (ODE) Prescription Use // OR Over-The-Counter-Use (Optional Format 1-2-96) [Division Sign-Off) Division Control, Infection Control,					
Surgical Straight Handpieces 1 types 9-5-10, 3-1-1, 3-1-11 and OEM-variant of type 9-10 friedent GmbH (type 90-5050) and OEM-variant of type 9-11 for Friadent GmbH (type 90-5030) and OEM-variant of type 9-11 for Nobel Biocare USA Inc. (formerly Steri-Oss INDICATIONS FOR USE: Indications are very widespread in the field of implantology and surgery. The mentioned handpiece have been developed especially for the following applications: WS-56 E: for e.g. osteotomia on the upper and lower jaw, germectomia, sequestrotomia. WS-57 E/KM: for e.g. implantology (preparation of the bone cavity, placing the implants), surgic treatment of dysgnathia, osteosynthesis, segmentosteotomia and especially minosteotomia. WS-92 E/3: for e.g hemisection, wisdom tooth extraction. S-11: for application in the area of the front teeth, root tip resection, bone remove osteotomia on the upper and lower jaw, preprosthetic surgical modellation sequestrotomia, fenestration on the alveolar appendix, apical ventilation, bore modellation, bone smoothing. SL-11: same as the S-11, for areas which are difficult to reach. S-9: for e.g. wisdom tooth removal, root tip resection, fenestration, apical ventilation osteotomia on the upper and lower jaw, preprosthetic surgical modellation sequestrotomia, fenestration on the alveolar appendix, bone modellation. (PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED.) Concurrence of CDRH, Office of Device Evaluation (ODE) Prescription Use (Optional Format 1-2-96) Civision Sign-Off) Division of Dental, Infection Control,	510 (k) N	JMBER (IF KI	10WN):		
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